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PATENTS

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appl. No. 10/089,315 Confirmation No.: 7290
Applicant: EDWIN YOUNG CALL
Filed: August 29, 2002
TC/A.U. 1762
Examiner: Katherine A. Bareford
Title: SYSTEM FOR PROTECTION OF SUBMERGED MARINE SURFACES

Docket No.: 032867.0031
Customer No.: 25461

MAIL STOP AMENDMENT - FEE

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT

In response to the Official Action dated January 26, 2004, please amend the above-identified application as follows:

Amendments to the Specification are reflected beginning on page 2 of this paper.

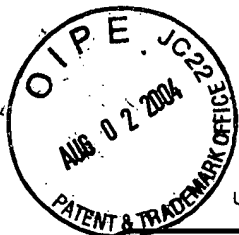
Amendments to the Claims are reflected in the listing of claims which begins on page 3 of this paper.

Remarks/Arguments begin on page 7 of this paper.

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Susan J. Revell



PTO/SB/21 (04-04)

Approved for use through 07/31/2006. OMB 0651-0031

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**TRANSMITTAL
FORM**

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/089,315
	Filing Date	August 29, 2002
	First Named Inventor	EDWIN YOUNG CALL
	Art Unit	1762
Examiner Name	Katherine A. Bareford	
Total Number of Pages in This Submission	Attorney Docket Number	032867.0031

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): \$475 check; return postcard
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Robert G. Weilacher, Reg. No. 20,531
Signature	
Date	July 26, 2004

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Typed or printed name	Susan J. Revell		
Signature		Date	July 26, 2004

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